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09/17/2009

02/08/2006

SMALL ENTITY

NO

7590 BRINKS HOFER GILSON & LIONE P.O. BOX 10395

CHICAGO, IL 60610

10/526,253

ADDIN TYDE

nonprovisional

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A. Dare, Reg. No. 50,775

12706/15

TOTAL FEE(S) DUE

\$1810

7059

DATE DUE

12/17/2000

(Date) 2009 December 14 APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO Lasse Wesseltoft Mogensen

TITLE OF INVENTION: APPARATUS FOR AND A METHOD OF ADJUSTING THE LENGTH OF AN INFUSION TUBE ISSUE FEE DUE

\$1510

	EXAMINER	ART UNIT	CLASS-SUBCLASS		
	DONDERO, WILLIAM E	3654	242-405100	,	
	1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.833). Change of correspondence address (or Change of Correspondence Address form FTOS Br122) antached. "Fee Address" indication (or "Fee Address" Indication form FTOS Br123 and Fee Address" Indication form FTOS Br123 Address "Indication form FTOS Br123 Address" Indication form FTOS Br123 Address "Indication form FTOS Br123 Address" Indication form FTOS Br123 Address "Indication form FTOS Br124 Address" Indication form FTOS Br124 Address "Indication fo		2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR. alternatively. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printen.		Brinks Hofer Gilson 2 3
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)					
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been					ed below, the document has been filed for

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5. Change in Entity Status (from status indicated above)

a Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Heich A Date December 14, 2009 Heidi A. Dare Registration No. Reg. No. 50,775 Typed or printed name _

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